

AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE: ☒ IXC ☐ CLEC ☐ ILEC ☐ Wireless

2001-347C

CERTIFICATED COMPANY INFORMATION

222566

A.R.C. Networks, Inc. _____
 Company Name _____

_____ (610) 755-4446 _____
 Dbafka Telephone # _____

2100 Renaissance Blvd. _____
 Mailing Address _____

King Of Prussia, PA 19406 _____
 City, State, Zip Code _____

2100 Renaissance Blvd. _____
 Business Location _____

King Of Prussia, PA 19406 _____ Montgomery _____
 City, State, Zip Code County _____

REGISTERED AGENT INFORMATION

Registered Agent: CT Corporation System _____

Mailing Address: 75 Beattie Place _____

City, State, Zip Code: Greenville, SC 29601 _____

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

- A. Charles C. Hunter 800 Westchester Ave., Suite N501, Rye Brook, NY 10573
General Manager (Include address if different than above.) _____
- _____/_____/_____ chunter@broadviewnet.com
 Telephone Number Facsimile Number E-mail Address
- B. Lisa Taylor 800 Westchester Ave., Suite N501, Rye Brook, NY 10573
Customer Relations /Complaints Representative (Include address if different than above.) _____
- 914-250-5420 / / ltaylor@broadviewnet.com
 Telephone Number Facsimile Number E-mail Address
- C1. Lisa Taylor 800 Westchester Ave., Suite N501, Rye Brook, NY 10573
Customer Relations/Complaints Representative for Escalated Complaints (Include address if different than above.) _____
- 914-250-5420 / / ltaylor@broadviewnet.com
 Telephone Number Facsimile Number E-mail Address
- C2. 800-276-2384
Customer Contact (Toll Free Number) _____
- D. _____
Engineering Operations (Include address if different than above.) _____
- _____/_____/_____
 Telephone Number Facsimile Number E-mail Address
- E. _____
Test and Repair (Include address if different than above.) _____
- _____/_____/_____
 Telephone Number Facsimile Number E-mail Address

F.

Emergencies (During non-office hours)

Telephone Number

Facsimile Number

E-mail Address

In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:

G.

Jarrold Harper – Manager, Regulatory & Compliance 2100 Renaissance Blvd., King Of Prussia, PA 19406

Regulatory Officer (Include address if different than above.)

610-755-4446

347-287-0845

jharper@broadviewnet.com

Telephone Number

Facsimile Number

E-mail Address

H.

Jarrold Harper

Dual Party Mailings (Name)

2100 Renaissance Blvd., King Of Prussia, PA 19406

Mailing Address

610-755-4446

347-287-0845

jharper@broadviewnet.com

Telephone Number

Facsimile Number

E-mail Address

I.

Jarrold Harper

Interim LEC Fund Mailings (Name)

2100 Renaissance Blvd. Kin Of Prussia PA 19406

Mailing Address

610-755-4446

347-287-0845

jharper@broadviewnet.com

Telephone Number

Facsimile Number

E-mail Address

J.

Jarrold Harper

Universal Service Fund Mailings (Name)

2100 Renaissance Blvd. Kin Of Prussia PA 19406

Mailing Address

610-755-4446

347-287-0845

jharper@broadviewnet.com

Telephone Number

Facsimile Number

E-mail Address

K.

Jarrold Harper

Gross Receipts Mailings (Name)

2100 Renaissance Blvd., King Of Prussia, PA 19406

Mailing Address

610-755-4446

347-287-0845

jharper@broadviewnet.com

Telephone Number

Facsimile Number

E-mail Address

L.

Jarrold Harper

Lifeline Mailings (Name)

2100 Renaissance Blvd., King Of Prussia, PA 19406

Mailing Address

610-755-4446

347-287-0845

jharper@broadviewnet.com

Telephone Number

Facsimile Number

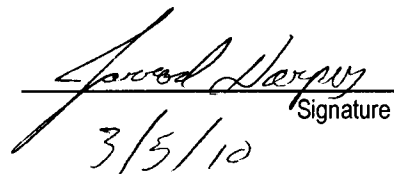
E-mail Address

Jarrold Harper

This form was completed by (print name)

Manager, Regulatory & Compliance

Title


3/5/10

Signature

Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC
Docketing Department
Post Office Drawer 11649
Columbia, South Carolina 29211

Office of Regulatory Staff
Attn: Jeanne Gordon
1401 Main Street, Suite 900
Columbia, South Carolina 29201

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